

PLEASE PRINT

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECUVED

APR 2 0 2017

NEW HAMPSHIRE

DEPARTMENT OF STATE I. Name of Lobbyist(s) Amy Bradley, Sam Levy, Jasmine Nears-Biesinger, Sarah Higginbotham II. Name of lobbyist's partnership, firm or corporation, if any: Everytown for Gun Safety Action Fund (Name of partnership, firm or corporation) PO Box 4184 New York NY 10163 Business Address: (Town/City) (Street) (State) (Zip Code) (646) 324-8250 e-mail lobbyreg@everytown.org (Telephone) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: Everytown for Gun Safety Action Fund (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. April 26, 2017 IV. Date of Report July 26, 2017 \Box Reports cover: activity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17 October 25, 2017 January 31, 2018 🗒 activity from 7/1/17 to 9/30/17 activity from 10/1/17 to 12/31/17 V. There have been no fees received and no reportable transactions made since the last report. \Box If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VL Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. 4 24 17 (Date)

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I Nome of Lable (144). Annu Dandley On the control of the New Division | 0 140 14 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| I. Name of Lobbyist(s) Amy Bradley, Sam Levy, Jasmine Nears-Biesinger, II. Name of lobbyist's partnership, firm or corporation, if any: | Saran Higginbotham |
| Everytown for Gun Safety Action Fund | |
| (Name of partnership, firm or corporation) | |
| III. Name of Client Everytown for Gun Safety Action Fund | Date <u>4/26/17</u> |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses: | relations, or public relations service |
| a) Total of all fees received in this reporting period | a) \$64,049.65 |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year). | b) \$ 0.00 ear) |
| c) Total of all fees received to date (Add lines a and b) | c) \$ _64,049.65 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ _0.00 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made be may be filed for the lobbyist(s)/firm a aggregate total of all expenses pair expenses; (b) the aggregate total of a le: meals purchased during a business stann \$10 that is given to the person and with a value of \$25.00 or less); an orting period of greater than \$25.00 for the of greater than \$25, purchase of the expense reimbursement, or political political states and the states are than \$25, but not greater than \$50, expense reimbursement, or political states are made by the same part of the states are made by the same part of all expenses are made by the same part of all expenses are made by the same part of all expenses are made by the same part of all expenses are made by the same part of all expenses are made by the same part of all expenses are made by the same part of all expenses are made by the same part of all expenses pair of all |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$ _8,543.15 |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ _0.00 |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ 55.506.50 |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ <u>64,049.65</u> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | f) \$ _64,049.65 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| Demers, Blaisdell & Prasol Inc. | \$21,450.00 |
| Chong + Koster LLC | \$ 23,438.00 |
| Hypotenuse Survey USA | \$ 7,200.00 |
| Winning Connections, Inc. | \$ 3,418.50 |
| | \$ |
| | \$ |
| | Ψ |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm | n that the foregoing information |
| is true and complete to the best of my knowledge and belief. | |
| Jacop Beron | 4/24/17 |
| (Signature of loobyist) | (Date) |
| Sarah J. Haganbotham (Print Name of lobbyist) | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

| Sworn | Statement/Affi | rmation by Lob | byist |
|--------|-----------------|------------------|-------|
| Statem | ent of Income a | and Expenses for | r: |

| Name of Lobbying partnership, firm, or corporation: Everytown for Gun Safety Action Fund |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any |
| particular client): Everytown for Gun Safety Action Fund |
| Date of Report (check one): April 26, 2017 |
| I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): |
| Addendum A(s). |
| Addendum B(s). |
| Addendum C(s). |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and |
| complete to the best of my knowledge and belief. |
| 4/24/17 |
| (Signature of lobbyist) (Date) |
| Print Name of lobbyist) |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

| Name of Lobbying partnership, firm, or corporation: Everytown for Gun Safety Action Fund |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any |
| particular client): Everytown for Gun Safety Action Fund |
| · · |
| Date of Report (check one): |
| April 26, 2017 |
| I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): |
| Addendum A(s). |
| Addendum B(s). |
| Addendum C(s). |
| |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. |
| (Signature of lobbyist) 4/24/i7 (Date) |
| (Print Name of lobbyist) |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

| Name of Lobbying partnership, firm, or corporation: Everytown for Gun Safety Action Fund |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any |
| particular client): Everytown for Gun Safety Action Fund |
| Date of Report (check one): |
| April 26, 2017 |
| I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): |
| Addendum A(s). |
| Addendum B(s). |
| Addendum C(s). |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. |
| (Signature of lobbyist) $\frac{4/24/17}{\text{(Date)}}$ |
| Any Bradley (Print Name of lobbyist) |